

REPORTS INVENTORY						CONTROL NO. DDS/OF-002			
PREPARE IN DUPLICATE									
1. TITLE OF REPORT (if a fill-in report include Form No.) Financial Management Improvement Report						2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING			
3. FUNCTIONAL AREA	PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)				
	LOGISTICS		SECURITY						
	MEDICAL		<input checked="" type="checkbox"/> FINANCE						
4. NO. OF COPIES PREPARED 22		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annual			6. DISTRIBUTION (No. of components not number of copies) 17				
7. FORMAT (memorandum, form computer print-out, etc.) Memorandum		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.			9. DIRECTIVE AUTHORITY REQUIRING REPORT BOB Bulletin No. 70-13				
10. PREPARING COMPONENT (include lowest level contributing information to report) Office of Finance				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Memoranda from Divisions and Staffs of the Office of Finance					
12. COST FACTORS									
A. MANUAL PREPARATION AND REVIEW COSTS									
GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED = COST PER YEAR		
Consolidation of all detailed forms attached.							\$ 1,144.87		
B. COSTS OF COMPUTER PRODUCED REPORTS									
TOTAL COSTS PER YEAR						\$ 1,144.87			
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Information reported is used by JFMIP Steering Committee (Compt. General, Sec. Treasury, Dir., OMB and Chairman/CSC) to (a) review the status of Agency financial systems, (b) evaluate improvement efforts under the JFMIP, (c) prepare the JFMIP Annual Rpt. to Heads of Executive Depts. and Establishments, and (d) summary rpt. by the Compt. General to the chairmen of the Appropriations and the Operations Committees of both Houses of Congress. This Agency started reporting in 1967. OMB levies reporting requirements in a new BOB Bulletin each year.									
14. FUTURE GOALS									
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS			
<input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						<input checked="" type="checkbox"/> OTHER (explain) As required by OMB			
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2					18. EXTENSION		

REPORTS INVENTORY					CONTROL NO.	
PREPARE IN DUPLICATE						
1. TITLE OF REPORT (If a fill-in report include Form No.) Financial Management Improvement Program Agency Report					2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL LOGISTICS MEDICAL		TRAINING SECURITY FINANCE		ADMIN. GENERAL OTHER (specify)
4. NO. OF COPIES PREPARED 22		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annual		6. DISTRIBUTION (No. of components not number of copies) 17		
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT BOB Bulletin No. 70-13		
10. PREPARING COMPONENT (include lowest level contributing information to report) Consolidated Report - OF/PPS (contributions from O/PPB, SIPS, OTR and OF Divisions and Staffs)				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Total 12 (Financial Mgt. Improvement Prog. Agency Rpt. -O/PPB; Annual Rept. on FMI and Significant Accomplishments by OF/CLD, OF/CTD, OF/MD, OF/AD, OF/PSAD, OF/ICAD, OF/ALS, OF/PPS, OF/PPS)		
12. COST FACTORS SIPS and OTR inputs.						
A. MANUAL PREPARATION AND REVIEW COSTS						
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X TIMES PREPARED = COST PER YEAR
GS-16	\$ 14.04		4		\$ 56.16	1 \$ 56.16
GS-14	11.01		44		484.44	1 484.44
GS-06	3.86		14		54.04	1 54.04
Notes: Costs for feeder reports other than O/PPB, SIPS, OTR and OF/PPS are to be included in individual reports by the OF Divisions and Staffs. O/PPB, OTR and SIPS feeders will be prepared by PPS						\$594.64
B. COSTS OF COMPUTER PRODUCED REPORTS						
TOTAL COSTS PER YEAR						\$ 594.64
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Information reported is used by JFMIP Steering Committee (Compt. General, Sec. Treasury, Dir. BOB and Chairman/CSC) to (a) review the status of Agency financial systems, (b) evaluate improvement efforts under the JFMIP, (c) prepare the JFMIP Annual Rept. to Heads of Executive Depts. and Establishments, and (d) summary rpt. by the Compt. General to the chairmen of the Appropriations and the Operations Committees of both Houses of Congress. This Agency started reporting in 1967. BOB levies reporting requirements in a new BOB Bulletin each year.						
14. FUTURE GOALS						
GOAL PROPOSED BY COMPONENT FOR THIS REPORT					ESTIMATED SAVINGS	
<input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE					<input checked="" type="checkbox"/> OTHER (explain) As required by BOB	
					MAN-HOURS	DOLLARS
						25X1
16. DATE OF INVENTORY 23 Sept. 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION C/PPS				18. EXTENSION

SECRET

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.) Financial Management Improvements & Significant Accomplishments						2. TYPE OF REPORT <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> STATISTICAL <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA	<input type="checkbox"/> PERSONNEL		<input type="checkbox"/> TRAINING		ADMIN. GENERAL OTHER (specify)		
	<input type="checkbox"/> LOGISTICS		<input type="checkbox"/> SECURITY				
	<input type="checkbox"/> MEDICAL		<input checked="" type="checkbox"/> FINANCE				
4. NO. OF COPIES PREPARED 4		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annually			6. DISTRIBUTION (No. of components not number of copies) 1		
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <input type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input checked="" type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT D/Finance			
10. PREPARING COMPONENT (include lowest level contributing information to report) C&L Branches and C/C&L Div.				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
GS-15	\$12.47	1	=	\$12.47	1	=	\$12.47
GS-07	4.41	1	=	4.41	1	=	4.41
GS-12	8.64	12	=	103.68	1	=	103.68
GS-11	6.49	3	=	19.47	1	=	19.47
GSF-6	4.68	2	=	9.36	1	=	9.36
GS-08	4.74	3	=	14.22	1	=	14.22
GS-05	3.25	1	=	3.25	1	=	3.25
GS-13	9.13	28	=	255.64	1	=	255.64
XXXXXX COSTS OF COMPUTER PRODUCED REPORTS							
GS-04	2.81	1	=	2.81	1	=	2.81
GS-12	7.51	4	=	30.04	1	=	30.04
GS-05	3.78	1/4	=	95	1	=	.95
							\$456.30
TOTAL COSTS PER YEAR						XXXXXX \$228.15*	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. OMB							
* One-half of the costs transferred to Significant Accomplishments.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS MAN-HOURS DOLLARS	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2					18. EXTENSION

Classification

CONTROL NO.

REPORTS INVENTORY

PREPARE IN DUPLICATE

1. TITLE OF REPORT (If a fill-in report include Form No.) Annual Report on Financial Management Improvements and Significant Accomplishments				2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA	PERSONNEL		TRAINING	ADMIN. GENERAL OTHER (specify)	
	LOGISTICS		SECURITY		
	MEDICAL	<input checked="" type="checkbox"/>	FINANCE		
4. NO. OF COPIES PREPARED 4	5. FREQUENCY (weekly, monthly, quarterly, etc.) Annual			6. DISTRIBUTION (No. of components not number of copies) 1	
7. FORMAT (memorandum, form computer print-out, etc) Memorandum	8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.			9. DIRECTIVE AUTHORITY REQUIRING REPORT Director of Finance	
10. PREPARING COMPONENT (include lowest level contributing information to report) Office of the Chief, Compensation and Tax Division			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Compensation and Tax Division Branches		

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
11	\$6.84	51		\$348.84	1		\$348.84

B. COSTS OF COMPUTER PRODUCED REPORTS

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TOTAL COSTS PER YEAR

\$ 174.42*

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

This report provides management with significant activities which were accomplished and outlines plan for financial management improvement for the coming year.

* One half of cost transferred to Significant Accomplishments.

14. FUTURE GOALS

GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain)		ESTIMATED SAVINGS	
<input type="checkbox"/> CHANGE		MAN-HOURS	DOLLARS
<input type="checkbox"/> DISCONTINUE			

16. DATE OF INVENTORY 17. NAME AND TITLE OF PERSON FURNISHING INFORMATION 18. EXTENSION

SECRET

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2

REPORTS INVENTORY					CONTROL NO.										
PREPARE IN DUPLICATE															
1. TITLE OF REPORT (If a fill-in report include Form No.) Financial Management Improvements & Significant Accomplishments for the Fiscal Year ended				2. TYPE OF REPORT	<input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING										
3. FUNCTIONAL AREA	PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)										
	LOGISTICS		SECURITY												
	MEDICAL	<input checked="" type="checkbox"/>	FINANCE												
4. NO. OF COPIES PREPARED 4	5. FREQUENCY (weekly, monthly, quarterly, etc.) Annually			6. DISTRIBUTION (No. of components not number of copies) 2											
7. FORMAT (memorandum, form computer print-out, etc) Memorandum	8. ADP PROCESSING <table border="1"><tr><td>YES</td><td>IF YES GIVE ADP PROCESSING NO.</td></tr><tr><td><input checked="" type="checkbox"/> NO</td><td></td></tr></table>			YES	IF YES GIVE ADP PROCESSING NO.	<input checked="" type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT Request from D/Finance							
YES	IF YES GIVE ADP PROCESSING NO.														
<input checked="" type="checkbox"/> NO															
10. PREPARING COMPONENT (include lowest level contributing information to report) Auditors			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Monthly Reports, Training Reports, Branch Reports												
12. COST FACTORS															
A. MANUAL PREPARATION AND REVIEW COSTS															
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	COST PER YEAR										
GS-07	\$ 3.89	4	\$15.56	1	\$ 15.56										
GS-15	11.74	16	187.84	1	<u>187.84</u>										
					\$203.40										
B. COSTS OF COMPUTER PRODUCED REPORTS															
TOTAL COSTS PER YEAR					\$203.40 \$ 101.70*										
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Required by Director of Finance to incorporate with all other Division and Staff reports in reports to DDS and B of B. * One-half of costs transferred to Significant Accomplishments.															
14. FUTURE GOALS															
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <table border="1"><tr><td><input checked="" type="checkbox"/> RETAIN AS IS</td><td><input type="checkbox"/> OTHER (explain)</td></tr><tr><td><input type="checkbox"/> CHANGE</td><td></td></tr><tr><td><input type="checkbox"/> DISCONTINUE</td><td></td></tr></table>				<input checked="" type="checkbox"/> RETAIN AS IS	<input type="checkbox"/> OTHER (explain)	<input type="checkbox"/> CHANGE		<input type="checkbox"/> DISCONTINUE		ESTIMATED SAVINGS <table border="1"><tr><td>MAN-HOURS</td><td>DOLLARS</td></tr><tr><td></td><td></td></tr></table>		MAN-HOURS	DOLLARS		
<input checked="" type="checkbox"/> RETAIN AS IS	<input type="checkbox"/> OTHER (explain)														
<input type="checkbox"/> CHANGE															
<input type="checkbox"/> DISCONTINUE															
MAN-HOURS	DOLLARS														
16. DATE OF INVENTORY	17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2				18. EXTENSION										

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REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (if a fill-in report include Form No.) Annual Report on Financial Management Improvements					2. TYPE OF REPORT		<input type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING
3. FUNCTIONAL AREA	PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)		
	LOGISTICS		SECURITY				
	MEDICAL		FINANCE				
4. NO. OF COPIES PREPARED 4		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annually			6. DISTRIBUTION (No. of components not number of copies) 1		
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.			9. DIRECTIVE AUTHORITY REQUIRING REPORT Memo from D/Finance		
10. PREPARING COMPONENT (include lowest level contributing information to report) Office of Chief, Accounts Division				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Memoranda from Branches			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR
GS-13	\$10.48		1		\$10.48		1 \$10.48
GS-15	12.84		2		25.68		1 25.68
GS-06	3.74		1/2		1.87		1 1.87
						\$38.03	
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$ 38.03	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Last two years this report has been combined with report on Significant Accomplishments. Cost of preparation has been equally divided. "User" costs should be reported by recipient (PPS) which prepares consolidated Office report.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS	
						MAN-HOURS	DOLLARS
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION					18. EXTENSION

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Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.) <div style="text-align: center;">Financial Management Improvement Report</div>						2. TYPE OF REPORT <div style="display: flex; justify-content: space-between;"> <div style="width: 100px;"></div> <div style="width: 100px;"> <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING </div> </div>	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)	
		LOGISTICS		SECURITY			
		MEDICAL		<input checked="" type="checkbox"/> FINANCE			
4. NO. OF COPIES PREPARED <div style="text-align: center;">2</div>		5. FREQUENCY (weekly, monthly, quarterly, etc.) <div style="text-align: center;">Annually</div>				6. DISTRIBUTION (No. of components not number of copies) <div style="text-align: center;">2</div>	
7. FORMAT (memorandum, form computer print-out, etc.) <div style="text-align: center;">Memorandum</div>		8. ADP PROCESSING <div style="display: flex; justify-content: space-between;"> <div style="width: 100px;"> <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO </div> <div style="width: 100px;">IF YES GIVE ADP PROCESSING NO.</div> </div>			9. DIRECTIVE AUTHORITY REQUIRING REPORT <div style="text-align: center;">BOB Bulletin</div>		
10. PREPARING COMPONENT (include lowest level contributing information to report) <div style="text-align: center;">OF/SS</div>				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
GS-05	\$ 3.15	1/4		\$.79	1		\$.79
GS-10	5.75	1/4		1.44	1		1.44
GS-13	9.94	1/4		2.49	1		2.49
GS-15	12.84	1/4		3.21	1		3.21
		1		\$ 7.93			\$ 7.93
B. COSTS OF COMPUTER PRODUCED REPORTS							
TOTAL COSTS PER YEAR						\$ 7.93	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. A negative report is usually given to PPS for reporting to BOB since Administrative work is volume and seldom do we have items which fall into FMI scope.							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input type="checkbox"/> RETAIN AS IS <input checked="" type="checkbox"/> OTHER (explain) to be determined by BOB <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS <div style="display: flex; justify-content: space-between;"> <div style="width: 100px;">MAN-HOURS</div> <div style="width: 100px;">DOLLARS</div> </div>	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION <div style="text-align: center;">Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2</div>					18. EXTENSION

SECRET

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REPORTS INVENTORY					CONTROL NO.	
PREPARE IN DUPLICATE						
1. TITLE OF REPORT (if a fill-in report include Form No.) Annual Report on Financial Management Improvements and Significant Accomplishments					2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL LOGISTICS MEDICAL		TRAINING SECURITY FINANCE		ADMIN. GENERAL OTHER (specify)
4. NO. OF COPIES PREPARED 5		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annually		6. DISTRIBUTION (No. of components not number of copies) 2		
7. FORMAT (memorandum, form computer print-out, etc.) Memorandum		8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT DD/S 67-4017 8/8/67		
10. PREPARING COMPONENT (include lowest level contributing information to report) PSAD				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)		
12. COST FACTORS						
A. MANUAL PREPARATION AND REVIEW COSTS						
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	= COST PER YEAR
This report is prepared from information already used in the Program Call.						No Cost.
B. COSTS OF COMPUTER PRODUCED REPORTS						
TOTAL COSTS PER YEAR						No Cost.
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. OMB Requirement.						
14. FUTURE GOALS						
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE					ESTIMATED SAVINGS MAN-HOURS DOLLARS	
16. DATE OF INVENTORY					17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100100004-2	
					18. EXTENSION	

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